CMS Manual System

Pub. 100-04 Medicare Claims Processing

Department of Health & Human Services (DHHS) Centers for Medicare & Medicaid Services (CMS)

Transmittal 211 Date: JUNE 18, 2004

CHANGE REQUEST 3310

I. SUMMARY OF CHANGES: The policy for Statement of Intent (SOI) procedures has been eliminated from Medicare regulations, therefore Medicare will no longer accept SOIs to extend the timely filing period of claims.

NEW/REVISED MATERIAL - EFFECTIVE DATE: May 24, 2004 *IMPLEMENTATION DATE: July 19, 2004

Disclaimer for manual changes only: The revision date and transmittal number apply to the red italicized material only. Any other material was previously published and remains unchanged. However, if this revision contains a table of contents, you will receive the new/revised information only, and not the entire table of contents.

II. CHANGES IN MANUAL INSTRUCTIONS:

(R = REVISED, N = NEW, D = DELETED)

R/N/D	CHAPTER/SECTION/SUBSECTION/TITLE	
R	1/70.7/Exceptions Allowing Extension of Time Limit	
R	1/70.7.2/Statement of Intent	

*III. FUNDING:

These instructions shall be implemented within your current operating budget.

IV. ATTACHMENTS:

X	Business Requirements
X	Manual Instruction
	Confidential Requirements
	One-Time Notification
	Recurring Update Notification

^{*}Medicare contractors only

Attachment - Business Requirements

Pub. 100-04 | Transmittal: 211 | Date: June 18, 2004 | Change Request 3310 |

SUBJECT: Elimination of Regulations for Written Statement of Intent (SOI)

I. GENERAL INFORMATION

- **A. Background:** Medicare regulations at <u>42 CFR 424.45</u> allowed for the submission of written SOIs to claim Medicare benefits. The purpose of an SOI was to extend the timely filing period for the submission of an initial claim. An SOI, by itself, did not constitute a claim, but rather was used as a placeholder for filing a timely and proper claim. The timely filing period to file a specific Medicare claim may have been extended when a valid SOI, with respect to that claim, was submitted to the appropriate Medicare contractor (or Regional Office, if the claimant did not know the address of their Medicare contractor) within the timely filing period. After being notified in writing by the appropriate Medicare contractor that an SOI had been determined to have been valid the claimant had until the end of the six month following the month in which the contractor notified the claimant that a claim may be filed, or by the end of the applicable timely filing period, whichever was later, to submit the claim. For example, if a contractor notified a claimant on January 24, that an SOI was valid, then the claimant had until June 30 of that year to have the subsequent claim filed, in order to get paid for the services identified on the valid SOI.
- **B. Policy:** A Final Rule published in the **Federal Register** dated April 23, 2004, Volume 69, Number 79, pages 21963-21966, amended 42 CFR Part 424 by removing the SOI provision at 424.45, effective May 24, 2004. Therefore, Medicare will no longer accept SOIs to extend the timely filing period for claims. The regulations in 42 CFR 424.45 will be deleted. This instruction updates the Internet Only Manual and business requirements accordingly.
- **C. Provider Education:** A provider education article related to this instruction will be available at http://www.cms.hhs.gov/medlearn/matters shortly after the CR is released. You will receive notification of the article release via the established "medlearn matters" listserv. Contractors shall post this article, or a direct link to this article, on their Web site and include information about it in a listserv message within one week of the availability of the provider education article. In addition, the provider education article must be included in your next regularly scheduled bulletin.

II. BUSINESS REQUIREMENTS

"Shall" denotes a mandatory requirement "Should" denotes an optional requirement

Requirement #	Requirements	Responsibility
Beginning with the claims filing period ending		FI/Carriers
	December 31, 2004 and thereafter, Medicare	

	contractors shall no longer accept SOIs to	
	extend the timely filing period of claims.	
3310.1.1	For the claims filing period ending December	ROs
	31, 2004 and thereafter, CMS ROs shall no	
	longer accept SOIs to extend the timely filing	
	period of claims.	

III. SUPPORTING INFORMATION AND POSSIBLE DESIGN CONSIDERATIONS

A. Other Instructions: N/A

X-Ref Requirement #	Instructions	
CMS will publish further instructions at a later date to no		
	standard systems to no longer accept Condition Code H0 (when	
	the release schedule allows).	
3310.1	Modifier QQ will be removed from the HCPCS list.	

B. Design Considerations: N/A

X-Ref Requirement #	Recommendation for Medicare System Requirements

C. Interfaces: N/A

D. Contractor Financial Reporting /Workload Impact: N/A

E. Dependencies: N/A

F. Testing Considerations: N/A

IV. SCHEDULE, CONTACTS, AND FUNDING

Effective Date: May 24, 2004 Implementation Date: July 19, 2004	These instructions shall be implemented within your current operating budget.
Pre-Implementation Contact(s): Sarah Shirey at 410-786-0187 or David Walczak at (410) 786-4475	
Post-Implementation Contact(s): Appropriate Regional Office	

70.7 - Exceptions Allowing Extension of Time Limit (Rev. 211, 06-18-04)

Medicare regulations allow only two exceptions to the timely filing requirements described above. Exceptions may be made in cases of the Medicare program's administrative error or in cases in which the provider filed a Statement of Intent (SOI) to file claims. *Effective May 24, 2004, Medicare will no longer accept SOIs to extend the timely filing limit.*

70.7.2 – Statement of Intent

(Rev. 211, 06-18-04)

Medicare regulations at <u>42 CFR 424.45</u> allow for the submission of written statements of intent (SOI) to claim Medicare benefits. The purpose of a SOI is to extend the timely filing period for the submission of an initial claim. A SOI, by itself, does not constitute a claim, but rather is used as a placeholder for filing a timely and proper claim. The timely filing period to file a specific Medicare claim defined in section A above may be extended when a valid SOI, with respect to that claim, is furnished to the appropriate Medicare *contractor* (i.e., the one that will be responsible for processing the claim), or regional office (RO) serving the area of the beneficiary's residence within the timely filing period. After a valid SOI has been filed, a completed claim that meets the requirements defined in section B above must be submitted to the appropriate Medicare contractor within six months after the month in which the contractor notifies the party who submitted the SOI that a claim may be filed, or by the end of the applicable timely filing period, whichever is later.

Effective May 24, 2004, Medicare contractors and ROs will no longer accept SOIs to extend the timely filing limit. The regulations at 42 CFR 424.45 have been eliminated. The timely filing period that ended December 31, 2003 was the last claims filing period that SOIs could have been timely filed. SOIs will not be accepted for the claims filing period ending December 31, 2004 and thereafter.